EXHIBIT

	_	City	of Jackso	n, M	lississi	ppl				
Original	F	Police Depa	artment in	cid	ent Rep	ort Fo	rm	- 1	1 - Case Number	02 2058
Supplement CRII CRII				RIMEANCIDENT				- 1	2 - Reporting Zone/Proc	23953
3 - Crime Attempt Only	UNV	Charges	4 - Clausificati	3	5-Loos	lion of Crime	(Address, Intern	ection, Block, E	10) 8-Location	S I T W
7 - Date Range of Occurrence (SL	M.7. 8 33.58	1/20	8 - Hour Rang	e of Oc	ourrence 2	20	AUGY TO	9 - Date of P	991/2 10-Time!	lapophyd
11 - Assault Circumstances Code	2	2 - Weapon Code	alla		18 - Blas	Motivation 9	500	14 - Afficiavit	Signed Yea	□No
VIC	TIM/COMP	LIANT/WITH	VESS/SUSF	EC.	T/ARRE	STED/F	EPORT	NG DED	SON/OTHER	
Code C Code I	17 - Naro		18	107	10	Days of Birth	20 - Injury	21 - VOR		23 - Businesa Phon
738 WOOD	CRO AMO	TXU.		2	25 - Alex	14	28 - Employ	Code ex/School Addre	G 778 399	Hours
27 - Haigh & 28 - Weight	29 - Hay Saly	30 - Eye Coy	31 - Facial Hair	32	Complexion	33 - S\$N	NUP	<u> </u>	34 - Activity Type	
36 - Clothing Description	UNK	Upn	1 UNIX		37 - Other	ID Cheracter	ielics (Scars, Ta	Hoos Ancente	Code P/L Handed, Other)	35 - Offender Used Code
15 - Involvement 18 - Violin Type Code 5 - Code 7	17-Name	1141, * 41	18	3494			20 - Injury	21 - VOR1		T
24 Adday 20 1 . Km	Ar G	SAD TO	720	31.E	25 - Alega	120	G Code	Gode	MA	23 - Business Phone
27 - 1907/y 28 - Weight	29 - Hair Cole?	30 Eur Oploy	31 Facilitate	32.	6	23 65N		Meshool Address	494 X/10	Hours
26 - Clothing Description	Toolo	BON	NA	1	DARKE.		CINK	·	B4 - Activity Type Code	35 - Offender Used Code
15 - Involvement 16 - Victim Type	17 - Name	Ur Johns	110.	Race/S		MIA			VL Menided, Other)	
Code Code	<u></u>	City/State	Zip	naces		Date of Birth	20 - Injury Code	21 - VOR1 Code	22 - Home Phone	23 - Business Phone
27 - Height 28 - Weight	29 - Hair Color			,	26 - Allas	,	28 - Employer	/School Addres		Hours
36 - Clothing Description	Ed - Hall Color	30 - Eye Color	31 - Facial Hair	32 -	Complexion	33 - SBN			34 - Activity Type Code	35 - Offender Used Code
15 - Involvement 18 - Victim Type	47 11				97 - Other I	D Characterie	fics (Scars, Tatt	loos, Accents, R	/L Handed, Other)	1 000
Code Code	17 - Name		18:	Race/8	ex 19-1	Date of Birth	20 · Injury	21 - VOR1	22 - Home Phone	23 - Business Phone
		City/State	Z Þ		25 - Ales		26 - Employed	School Address		Hours
27 - Height 28 - Weight	29 - Hair Octor	30 - Eye Color	31 - Facial Hair	32-0	Complexion	38 - SSN	***************************************	,	34 - Activity Type	35 - Offender Used
36 - Clothing Description		1.01			37 • Other K	Oharecteris	ica (Scara, Tetto	oos, Accents, R	Code L Handed, Office)	Code
,			EVIDEN	ICE/	PROPE	RTY	*			
38 - CODES TO BE USED: B - CODE QTY. MAKE/BRA	SotheStolen and R	ecovered D - De	SERIAL NUMBE	dence	F - Foun	-		overed S -	Stolen K - SafeKee	ping Z-Seized
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39 - LOCATION OF PROPERTY/EVIDE	NCE PRECIN	ICT 1 I PE	RECINCT 2	T ==		<u> </u>	JPD F	ECOR	700	
			TECINCI 2	PF	RECINCT 3	Ļ. PR	EUROT	自动自	CE OFFICE OTHE	A
10 - Vehicle Year// 41 - Make 4		, , , , , , , , , , , , , , , , , , , ,		EHK	CLE					
N/4	2 - Model 43 - Co		ber 45	- Year	48 - 5	ats 47	- Vehicle fdenti	fication Number	,	
8 - Special Features (Damage, Decais		ı, Etc.)			49 - O	wner (Name I	Address)			
O - Vehicle Status Code	wed Yes	∐ No 5	2 - Name of Wreck	er .			53 -	Vehicle Stored	At	
						-				
J-4-1 Se - Reporting Office	MARK	Chan	5	6 - IBM	an 57	- Other Offic	ar(s) & IBM(s)	alla		
B - Reporting Officer's Signatur	11/	188		5	A Spanyles	Signatoria		-///		10 mm 2
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			RE	CO	RDS					12
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Supplement	Narrative/Supplementary Report Form	
	pes of Incident Witness/Interviews I, Investigative Follow-Up Sta	Case Number 2020 - 02393
- Complainant	Charge RUNAWAY	Des & Time!
me Changed To:	Person Meking Change & IBM	Date of Change
Classification Changed To:		
	Continuation, Narrative and Witness Statemer	nt .
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mpleinant/Witness Signature (When used as Complete Sure Code Closure Date Reporting Office		Dute